

**CENTER FOR DRUG EVALUATION AND  
RESEARCH**

*APPLICATION NUMBER:*

**20-120**

**CORRESPONDENCE**

Printed by Sandra Barnes  
**Electronic Mail Message**

Activity: COMPANY CONFIDENTIAL

**Date:** 26-Feb-1998 10:21am  
**From:** Bradley Gillespie  
GILLESPIEB  
**Dept:** HFD-870 PKLN 10B31  
**Tel No:** 301-827-1078 FAX 301-827-1273

**TO:** Sandra Barnes ( BARNES )  
**TO:** Mei-Ling Chen ( CHENME )

**Subject:** Tri-Nasal Label

Mrs. Barnes:

As I stated earlier this morning, most of my comments/complaints were directed towards the Nasacort label. My corrections to the PK section are redlined/overstricken in the attached WP file. Mei-Ling, if you need to discuss this label further, please talk to me or Sandy ASAP.

Thanks,  
Brad

**APPEARS THIS WAY  
ON ORIGINAL**

WITHHOLD 73 PAGE (S)

Draft  
Labeling

# MURO

July 1, 1996

John Jenkins, M.D.  
CDER, Food and Drug Administration  
Division of Pulmonary Drug Products, HFD 570  
5600 Fishers Lane, Room 10B-03  
Rockville, MD 20857

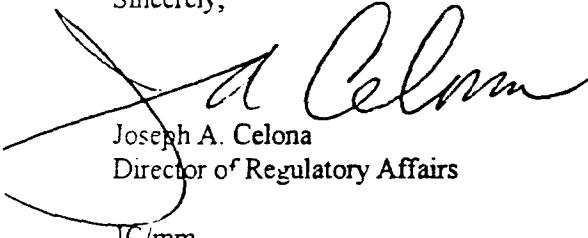
**RE: NDA #20-120 Tri-Nasal™ (triamcinolone acetonide 0.05%) Nasal Solution**

Dear Dr. Jenkins:

The original return receipt reply from Rhone-Poulenc Rorer documenting receipt of Muro's patent non-infringement notice concerning Muro's Tri-Nasal NDA did not include the date of delivery (RE: NDA Amendment April 9, 1996). The Tewksbury Post Office has issued Muro a Domestic Return Receipt (PS Form 3811-A) which verifies 4/5/96 as RPR's, signed receipt of delivery for a the non-infringement notice.

A copy of this document is enclosed.

Sincerely,

  
Joseph A. Celona  
Director of Regulatory Affairs

JC/mm  
Enclosure

**APPEARS THIS WAY  
ON ORIGINAL**

**Muro Pharmaceutical, Inc.**  
890 East Street, Tewksbury, Massachusetts. 01876-1496  
Phone (508) 851-5981 FAX (508) 851-7346



ORIGINAL

FISH & RICHARDSON P.C.

FISH RICHARDSON & NEAVE  
BOSTON  
(1916-1969)

601 THIRTEENTH STREET, N.W.  
WASHINGTON, D.C. 20005

FREDERICK P. FISH  
(1855-1930)

TELEPHONE: 202/783-5070  
FAX: 202/783-2331

W K RICHARDSON  
(1859-1951)

ORIG AMENDMENT

N(xR)

BOSTON  
617/542-5070

HOUSTON  
713/629-5070

SILICON VALLEY  
415/322-5070

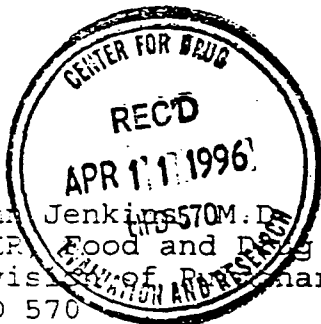
TWIN CITIES  
612/335-5070

SOUTHERN CALIFORNIA  
619/678-5070

NEW YORK  
212/765-5070

April 9, 1996

Our File: 07215/002001



John Jenkins, M.D.  
CDER, Food and Drug Administration  
Division of Pharmaceutical Products  
HFD 570  
5600 Fishers Lane, Room 10B-03  
Rockville, Maryland 20857

Muro Pharmaceutical, Inc.  
Patent Certification Notice  
Return Receipt for File  
NDA 20-120

Dear Dr. Jenkins:

On behalf of Muro Pharmaceutical, Inc., this is to amend the above-captioned NDA. Enclosed please find the signed domestic return receipt from Muro's Patent Certification Notice delivered to Rhone-Poulenc Rorer, Inc., the owner of Patent No. 4,767,612 and holder of the FDA-approved new drug application, NDA 19-798.

Please contact the undersigned attorney if you have any questions.

Very truly yours,

  
Terry G. Mahn

TGM/smw  
Enclosure  
cc: Muro Pharmaceutical, Inc.

58201.W11

APPEARS THIS WAY  
ON ORIGINAL

UNITED STATES POSTAL SERVICE

Official Business



PENALTY FOR PRIVATE  
USE TO AVOID PAYMENT  
OF POSTAGE, \$300



Print your name, address and ZIP Code here

Terry G. Mahn  
Fish & Richardson P.C.  
601 13th Street, N.W.  
Fifth Floor North  
Washington, D.C. 20005

24



APPEARS THIS WAY  
ON ORIGINAL

Is your RETURN ADDRESS completed on the reverse side?

**SENDER:**

- Complete items 1 and/or 2 for additional services.
- Complete items 3, and 4a & b.
- Print your name and address on the reverse of this form so that we can return this card to you.
- Attach this form to the front of the mailpiece, or on the back if space does not permit.
- Write "Return Receipt Requested" on the mailpiece below the article number.
- The Return Receipt will show to whom the article was delivered and the date delivered.

I also wish to receive the following services (for an extra fee):

1. ☐ Addressee's Address
2. ☐ Restricted Delivery

Consult postmaster for fee.

3. Article Addressed to:

Mr. Martin F. Savitzky  
Rhone-Paulenc Rorer, Inc.  
500 Arcola Road  
Collegeville, PA 19426-0107

4a. Article Number

2010101529

4b. Service Type

- ☐ Registered ☐ Insured  
☒ Certified ☐ COD  
☐ Express Mail ☒ Return Receipt for Merchandise

7. Date of Delivery

5. Signature (Addressee)

8. Addressee's Address (Only if requested and fee is paid)

6. Signature (Agent)

J. B. L. H.

PS Form 3811, December 1991 ★U.S. GPO: 1993-352-714

DOMESTIC RETURN RECEIPT

Thank you for using Return Receipt Service.

APPEARS THIS WAY  
ON ORIGINAL



Date: June 19, 1996

To: Mr. Brant T. Sayre  
Muro Pharmaceutical, Inc.  
890 East St.  
Tewksbury, MA 01876

Dear Mr. Sayre,

Here is a PS 3811-A, Domestic Return Receipt After Mailing). Please let me know if this does not provide the information you are looking for.

I am sorry the original form was not correct and apologize for our error.

Please contact me anytime you have a question concerning service.

MAILING OFFICE: Postmark to indicate fee was previously paid for service described in item 2.



Attach applicable fee as shown in DMM for Return Receipt after mailing.

CUSTOMER: Complete unshaded (top) area and enter your name and address on the reverse.

Check box next to desired service:

- ☒ 1. RECEIPT AFTER MAILING - Provide name of individual, company, or organization to whom delivered and date of delivery  
☐ 2a. DUPLICATE RECEIPT - Provide name of individual, company, or organization to whom delivered and date of delivery.  
☐ 2b. DUPLICATE RECEIPT (with address of delivery) - Provide name of individual, company, or organization to whom delivered, date of delivery, and addressee's

3. Mailing Date JUN 10 1996		4. COD Number	5. Return Receipt for Merchandise No.
6. Registered Number	7. Certified Number Z010101529	8. Insured Number	9. Express Mail Number
10. Article Addressed To MR MARTIN F SAUTZKY			
11. Delivery Office Postmark	13. Delivery Date JUN 4-5-96		15. <input type="checkbox"/> Postal Records Show Delivery Was Made
14. Address (Complete only if required)		16. Clerk's Initials	

PS Form 3811-A, July 1993

Domestic Return Receipt (After Mailing)

Thank you,

Linda L. Coan  
Officer-In-Charge  
Tewksbury Post Office

APPEARS THIS WAY  
ON ORIGINAL





DEPARTMENT OF HEALTH & HUMAN SERVICES

Public Health Service

Food and Drug Administration  
Rockville MD 20857

NDA 20-120

SEP 17 1996

Muro Pharmaceutical, Inc.  
890 East Street  
Tewksbury, Massachusetts 01876-1496

Attention: Joseph A. Celona  
Director of Regulatory Affairs

Dear Mr. Celona:

Please refer to your April 27, 1992 new drug application submitted under section 505(b) of the Federal Food, Drug, and Cosmetic Act for Tri-Nasal Spray (triamcinolone acetonide nasal solution, 0.05%).

We acknowledge receipt of your amendments dated October 31, 1995, February 12 and 15, March 7, April 1, 9, 11, 24, and 29, May 7, June 4, July 1, 22, and 24, and August 2, 1996.

We have completed our review of your application, as amended, and find the information presented is inadequate, and the application is not approvable under section 505(d) of the Act and 21 CFR 314.125(b). The deficiencies may be summarized as follows.

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WITHHOLD 9 PAGE (S)

22. Please submit a revised Environmental Assessment (EA) including a releasable copy of the EA in accordance with the following comments.
  - a. The names, job title and qualifications of the preparers of the document should be included.
  - b. The total certification statement should be included before the signature in the EA.
  - c. Tri-Nasal Spray qualifies for a tier 0 environmental assessment [the MEEC for the test article is less than 1part/billion (1 ppb)], therefore items 7, 8, 9, 10, 11, and 15 appendices G, H, I, K, and L should be excluded.

If you have any questions, please refer to the *Guidance for Industry: For the Submission of an Environmental Assessment in Human Drug Applications and Supplements*, November 1995.

23. The following preliminary comments pertain to the package insert. A revised draft package insert should be submitted which incorporates these comments.
  - a. The Pharmacokinetics subsection of the CLINICAL PHARMACOLOGY section should include information regarding:
    - i. The absence of gender effect on pharmacokinetics of TAA from Tri-Nasal; and

- ii. a paragraph describing dose proportionality of intranasal TAA. Suggested wording for the paragraph is as follows.

A pharmacokinetic study to demonstrate dose proportionality was conducted in perennial allergic rhinitis patients. The  $C_{max}$  and AUC of the 200 and 400 ug doses increased less than proportionally when compared to the 100 ug dose.

- b. Study 100-204 was not adequately designed to support a topical effect claim for Tri-Nasal; exposure to triamcinolone when given as Tri-Nasal on a daily basis is greater than when administered as a weekly intramuscular injection of Kenalog. Therefore this claim should be removed from the package insert.
- c. The sentence  
[  
found in the  
first paragraph of the Pharmacodynamics  
subsection of the CLINICAL PHARMACOLOGY section  
should either be removed or should state that  
[ ]
- d. Since the — mcg per day dose was not studied in an adequate clinical trial, wording that conveys that as with any corticosteroid, once relief is obtained the daily dose should be

titrated to the lowest effective dose, should replace the specific instructions for use of a — mcg dose in the DOSAGE AND ADMINISTRATION section.

- e. The description of study 1-0501 found in the third paragraph of the Pharmacodynamics subsection of the CLINICAL PHARMACOLOGY section should be modified to reflect the small size of the trial and to remove the reference to the  

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as well as the claim that there was a  

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This is based on re-analysis of this study looking at response to cosyntropin challenge: a numerical dose effect of suppression by Tri-Nasal is seen and the prednisone effect is no longer statistically significantly different from placebo.
- f. The adverse event table in the package insert should be based on all placebo controlled trials and should indicate that the control used was vehicle placebo. Please submit an adverse event table for our review that contains all adverse events (not just those attributed to the drug) from all placebo controlled trials with the adverse events presented for the 200 and 400 mcg per day doses separately as well as combined, in order to determine the most appropriate format for this table in the package insert.
- g. Please refer to the attached draft approved Nasacort Nasal Inhaler package insert for guidance in updating the preclinical section of the proposed Tri-Nasal package insert.

We may have additional labeling comments following our review of the requested CMC data and the requested draft labeling incorporating the above comments.

Within 10 days after the date of this letter, you are required to amend the application, notify us of your intent to file an amendment, or follow one of your other options under 21 CFR 314.120. In the absence of any such action FDA may proceed to withdraw the application. Any amendments should respond to all the deficiencies listed. We will not process a partial reply as a major amendment nor will the review clock be reactivated until all deficiencies have been addressed.

Sandy Barnes  
Project Manager  
(301) 827-1075

**/S/**

Division of Pulmonary Drug Products  
Office of Drug Evaluation II  
Center for Drug Evaluation and Research

**APPEARS THIS WAY  
ON ORIGINAL**



DEPARTMENT OF HEALTH & HUMAN SERVICES

Rec 8/17/92

Public Health Service

Food and Drug Administration  
Rockville MD 20857

AUG 14 1992

NDA 20-120

Muro Pharmaceutical Incorporated  
890 East Street  
Tewksbury, Massachusetts 01876

Attention: Joseph A. Celona  
Director, Regulatory Affairs

Dear Mr. Celona:

Please refer to your new drug application dated January 17, 1992 submitted pursuant to section 505(a) of the Federal Food, Drug, and Cosmetic Act for Trinasal (triamcinolone acetonide nasal solution 0.05%).

We also note our telephone conversation on August 4, 1992.

We have completed our review and find the information presented is inadequate and the application is not approvable. The major and minor deficiencies are summarized as follows.

CLINICAL:

MAJOR:

1. The lack of long term safety data on Trinasal patients. (At least 300 patients with safety data up to 6 months will be needed).
2. The lack of an acceptable clinical topical effect study at the appropriate oral dose. (The design and dosing selection of this study should be discussed with the division).
3. Inadequate efficacy analysis; i.e, lack of an appropriate placebo symptomatic day analysis.
4. Lack of a therapeutic dose response study.

PHARMACOKINETICS:

MAJOR:

1. The lack of an adequate and established assessment of the systemic absorption and dose proportionality profile that is required for approval of an NDA under the regulations for any drug product.
2. The lack of an in vivo assessment of the pharmacokinetics of Trinasal (triamcinolone acetonide nasal solution 0.05%) following single and multiple doses.

CLINICAL/PHARMACOKINETIC:

MAJOR:

1. Lack of a therapeutic and pharmacokinetic comparison to the currently marketed innovator.

PHARMACOLOGY:

MAJOR:

1. The lack of carcinogenicity studies.

CHEMISTRY:

MAJOR:

1. The limits on the Quantity Delivered per Spray specification are too wide. The usual limits are \_\_\_\_\_ for the average and \_\_\_\_\_ individual \_\_\_\_\_

MINOR:

1. Please explain why the solution is formulated with \_\_\_\_\_



2. [ ]
3. The typo in the specification should be corrected -  
\_\_\_\_\_ should read \_\_\_\_\_
4. Please provide the following information on the bottles  
made by \_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_  
\_\_\_\_\_

Items \_\_\_\_\_ may be referenced to a DMF via a letter  
of authorization from the DMF holder.

The above chemistry deficiencies were faxed to you on August 7,  
1992.

ALL REVIEW AREAS:

The format of the submission does not allow ready access to the  
data/information that is contained in the NDA nor does it  
facilitate any additional reviewer performed data manipulation.  
In addition the chemistry portion is not formatted in accordance  
with the guidelines. The specifics of these issues should be  
discussed with the review team.

CONCLUSIONS:

If you are interested in refiling this NDA, we will be glad to  
discuss the deficiencies and to also identify what we feel you  
need to do in order to file an NDA and produce one that is  
potentially reviewable in 180 days.

Within 10 days after the date of this letter, you are required to  
amend the application, notify us of your intent to file an  
amendment, or follow one of your other options under 21 CFR  
314.120. In the absence of any such action FDA may withdraw the  
application. A partial response will not be processed as a major  
amendment, and, therefore, the review clock will not be  
activated.

Should you have any questions, please contact:

Frances V. LeSane  
Project Manager  
(301) 443-3741

Sincerely yours,

The Review Team of the Pilot Drug Evaluation  
Staff, Center for Drug Evaluation and  
Research:

*/S/*  
John G. Harter, M.D.  
Director, PDES

*/S/*  
Patricia Y. Love, M.D.  
Medical Officer

*/S/*  
Charlotte A. Yaciw  
Chemist

*/S/*  
E. Dennis Bashaw, Pharm.D.  
Pharmacokineticist

*/S/*  
Conrad Chen, Ph.D.  
Pharmacologist *for*

APPEARS THIS WAY  
ON ORIGINAL

**MEMORANDUM**

**DEPARTMENT OF HEALTH AND HUMAN SERVICES  
PUBLIC HEALTH SERVICE  
FOOD AND DRUG ADMINISTRATION  
CENTER FOR DRUG EVALUATION AND RESEARCH**

**DATE:** November 5, 1999

**FROM:** Sandy Barnes  
Project Manager

**SUBJECT:** NDA 20-120 Labeling and Nomenclature Consultation

**TO:** The File

An April 4, 1996 consultation from the CDER Labeling and Nomenclature Committee recommended against the use of Tri-Nasal as a proposed trademark for this product. The committee objected to "tri" as it could imply the number of doses or number of times per day the product should be used. In addition, the committee was concerned that the "tri" could be used for promotional purposes, as in "try". The committee also objected to the use of the route of administration in the trademark. They did recognize that there is precedent for the use of both "tri" and "nasal", however they found the trademark unacceptable.

In consultation with the Division and Office Directors at the time of the consult, the team made the decision to allow the use of the trademark.

**APPEARS THIS WAY  
ON ORIGINAL**

Consult #543 (HFD-570)

TRI-NASAL SPRAY

triamcinolone acetonide nasal solution 0.05%

The Committee was concerned that Tri- in the trademark implies three and could be confused with the number of doses or the number of times per day that the medication should be used. Additionally, there is a promotional aspect that "tri" will be used as "try" in marketing campaigns. In general, the route of administration should also be avoided in a trademark since alternate dosage forms may be developed which utilize a different route of administration. The Committee is aware that many precedent names have used both "Tri" and "Nasal" in the trademarks, however the Committee recommends against the use of this proposed trademark based on the preceding objections.

The Committee finds the proposed trademark to be unacceptable.

ISI 4/4/96, Chair  
CDER Labeling and Nomenclature Committee

APPEARS THIS WAY  
ON ORIGINAL